TOXICOLOGY REQUISITION

VIBRA HEALTHLAB
1307-A Allen Drive
Troy, MI 48083
Ph: 248-846-0663
Fax: 248-602-0627

Patient Name: _____
Date of Birth: _____
Collection Date/Time: _____

PATIENT & INSURANCE INFORMATION (Required)

*Attach demo and front/back of card

Last Name: | First Name: | DOB:

Patient Address: | ☐ Male ☐ Female

Patient Self Pay | Facility Pay | Insurance Pay

Insurance | ID/Claim: | DOI/DOA ☐ Auto ☐ Worker

PROVIDER NAME AND ADDRESS (Required)

ICD-10 TREATMENT CODES (Required)

☐ F10.20 ☐ Z79.891 ☐ _____
☐ F11.20 ☐ Z79.899 ☐ _____

This list is intended to be used as a reference to assist ordering physicians in providing ICD-10 Codes as required by Medicare and other insurers to determine medical necessity of testing being ordered. This is not an exhaustive list of all applicable diagnoses and is for educational purposes. Physicians are not required to use these codes but should report the diagnostic codes that best describes the reason for performing the test based on individual patient diagnoses. It is the physicians responsibility to determine both the medical need for, and the utilization of, all healthcare services ordered.

RISK ASSESSMENT *

☐ Low (2x in 365 days)
☐ Moderate (2x in 180 days)
☐ High (3x in 90 days)

*Required for Chronic Opiate Therapy (COT)

MEDICAL NECESSITY (Required)

☐ Identifies absence of prescribed medication
☐ Identifies undisclosed substances
☐ Identifies substances that contribute to adverse drug events or drug-drug interactions
☐ Positive Point-of-Care Screens
☐ Provides objectivity to the treatment plan
☐ New patient evaluation
☐ Other: _____

MEDICATIONS (ATTACH PATIENT'S MEDICATION LIST) (Required)

- ☐ Abilify
- ☐ Actiq
- ☐ Acetaminophen
- ☐ Adderall
- ☐ Alprazolam
- ☐ Ambien
- ☐ Amitriptyline
- ☐ Amphetamine
- ☐ Ativan
- ☐ Buprenorphine
- ☐ Butalbital
- ☐ Butisol
- ☐ Butrans
- ☐ Carisoprodol
- ☐ Celexa
- ☐ Clonazepam
- ☐ Codeine
- ☐ Concerta
- ☐ Cymbalta
- ☐ Dalmane
- ☐ Demerol
- ☐ Desyrel
- ☐ Diastat
- ☐ Diazepam
- ☐ Dilaudid
- ☐ Doxepin
- ☐ Duragesic
- ☐ Effexor
- ☐ Elavil
- ☐ Fentanyl
- ☐ Fioricet
- ☐ Flexeril
- ☐ Gabapentin
- ☐ Halcion
- ☐ Hydrocodone
- ☐ Hydromorphone
- ☐ Klonopin
- ☐ Lexapro
- ☐ Lorazepam
- ☐ Lorcet
- ☐ Lortab
- ☐ Lyrica
- ☐ Methadone
- ☐ Miltown
- ☐ Mitragynine
- ☐ Morphine
- ☐ MS Contin
- ☐ Naloxone
- ☐ Naltrexone
- ☐ Narcan
- ☐ Neurontin
- ☐ Nembutal
- ☐ Norco
- ☐ Nubain
- ☐ Nucynta
- ☐ Oleptro
- ☐ Opana
- ☐ Oxycodone
- ☐ Oxycontin
- ☐ Oxymorphone
- ☐ Paxil
- ☐ Percocet
- ☐ Phenobarbital
- ☐ Pregabalin
- ☐ Primidone
- ☐ Prozac
- ☐ Quetiapine
- ☐ Risperdal
- ☐ Ritalin
- ☐ Roxicodone
- ☐ Restoril
- ☐ Rohypnol
- ☐ Seconal
- ☐ Seroquel
- ☐ Soma
- ☐ Sonata
- ☐ Suboxone
- ☐ Subutex
- ☐ Suprenza
- ☐ Talwin
- ☐ Temazepam
- ☐ Tramadol
- ☐ Trazodone
- ☐ Tylenol #3
- ☐ Tylenol #4
- ☐ Ultram
- ☐ Valium
- ☐ Versed
- ☐ Vicodin
- ☐ Vivitrol
- ☐ Vyvanse
- ☐ Wellbutrin
- ☐ Xanax
- ☐ Zoloft
- ☐ Zolpidem
- ☐ Zubsolv
- ☐ OTHER: _____
- ☐ OTHER: _____
- ☐ OTHER: _____
- ☐ OTHER: _____
- ☐ OTHER: _____

SPECIMEN INFORMATION

Collector Name:	Specimen Type:	Collection Date:	Collection Time:	4-Min Temp. Check:	Temp 90-100° F:
_____	☐ Urine ☐ Oral Fluid	___/___/___	_____ ☐ AM ☐ PM	☐ YES ☐ NO	☐ YES ☐ NO

POINT-OF-CARE SCREEN RESULTS (Required if Performed In House)

Pos	Neg		Pos	Neg		Pos	Neg		Pos	Neg	
☐	☐	Amphetamines	☐	☐	Buprenorphine	☐	☐	Methadone	☐	☐	Oxycodone
☐	☐	Barbiturates	☐	☐	Cocaine	☐	☐	Methamphetamine	☐	☐	Phencyclidine (PCP)
☐	☐	Benzodiazepines	☐	☐	Marijuana (THC)	☐	☐	Opiates	☐	☐	Propoxyphene

SCREENING TESTS (Required If No POC)

Specimen Validity included in **all Requested Screens and Confirmations - For Urine Only

Immunoassay Screen Urine ☐

- ☐ Amphetamines
- ☐ Barbiturates
- ☐ Benzodiazepines
- ☐ Buprenorphine
- ☐ Cocaine
- ☐ EDDP
- ☐ Fentanyl
- ☐ Methadone
- ☐ Opiate
- ☐ Oxycodone
- ☐ Phencyclidine(PCP)
- ☐ THC

Additional Urine Screening Tests

- ☐ Cotinine(Nicotine)
- ☐ Methamphetamine

Oral Fluid Screen ☐

- ☐ Amphetamines
- ☐ Benzodiazepines
- ☐ Buprenorphine
- ☐ Cocaine
- ☐ Cotinine (Nicotine)
- ☐ EDDP
- ☐ Fentanyl
- ☐ Methadone
- ☐ Methamphetamine
- ☐ Opiates
- ☐ Oxycodone
- ☐ Phencyclidine
- ☐ Propoxyphene
- ☐ THC
- ☐ Zolpidem

CONFIRMATION, GROUP PANELS

**Targets are available for Oral Fluid Testing

☐ Reflex from Positive Screen ☐ Reflex Prescribed Medication ☐ Custom Panel

☐ Alcohol
- ☐ EtG/EtS

☐ Alkaloids,Not Otherwise Specified
- ☐ Kratom-7-OH-Mitragynine
- ☐ Cotinine-Nicotine **
- ☐ Kratom-Mitragynine **
- ☐ Psilocin

☐ Amphetamines
- ☐ Amphetamine **
- ☐ Ephedrine
- ☐ Methamphetamine **
- ☐ Phentermine **

☐ Analgesics, Non-Opioid
- ☐ Acetaminophen **

☐ Antidepressants, Not Otherwise Specified
- ☐ Bupropion
- ☐ O-Desmethylvenlafaxine
- ☐ Venlafaxine **

☐ Antidepressants, Serotonergic Class
- ☐ Citalopram **
- ☐ Duloxetine **
- ☐ Fluoxetine **
- ☐ Norfluoxetine
- ☐ Paroxetine **
- ☐ Sertraline **
- ☐ Tianeptine
- ☐ Trazodone

☐ Antidepressants, Tricyclic and Other Cyclicals
- ☐ Amitriptyline**
- ☐ Desipramine**
- ☐ Desmethyldoxepin
- ☐ Doxepin **
- ☐ Imipramine **
- ☐ Nortriptyline **

☐ Antipsychotics, Not Otherwise Specified
- ☐ Aripiprazole
- ☐ Norquetiapine
- ☐ Quetiapine **

☐ Barbiturates
- ☐ Butalbital
- ☐ Phenobarbital

☐ Benzodiazepines
- ☐ Alpha-OH-alprazolam
- ☐ Alpha-OH-midazolam
- ☐ Alpha-OH-triazolam
- ☐ Alprazolam**
- ☐ 7-aminoclonazepam **
- ☐ Chlordiazepoxide**
- ☐ Clonazepam**
- ☐ Diazepam**
- ☐ Flunitrazepam
- ☐ Flurazepam **
- ☐ 2-Hydroxyethylflurazepam
- ☐ Lorazepam **
- ☐ Midazolam
- ☐ Nordiazepam **
- ☐ Oxazepam **
- ☐ Temazepam **

☐ Buprenorphine
- ☐ Buprenorphine **
- ☐ Norbuprenorphine **

☐ Cannabinoids, Natural
- ☐ THC-COOH **

☐ Cannabinoids,Synthetic
- ☐ JWH-250 4-Hydroxypentyl
- ☐ JWH-018 5-Pentanoic Acid

☐ Cocaine
- ☐ Benzoylecgonine **
- ☐ Cocaine **

☐ Fentanyl/Fentanyl Analogs
- ☐ Alfentanil
- ☐ Carfentanil
- ☐ Fentanyl **
- ☐ Norfentanyl **

☐ Gabapentin, Non-Blood
- ☐ Gabapentin **

☐ Heroin
- ☐ 6-Acetylcodeine-Heroin
- ☐ 6-MAM-Heroin **
- ☐ Heroin **

☐ Ketamine
- ☐ Ketamine **
- ☐ Norketamine **

☐ Methadone
- ☐ EDDP **
- ☐ Methadone **

☐ Methylenedioxy Amphetamines
- ☐ MDMA-Ecstasy **

☐ Methylphenidate
- ☐ Methylphenidate **
- ☐ Ritalinic Acid **

☐ Opiates
- ☐ Codeine **
- ☐ Hydrocodone **
- ☐ Hydromorphone **
- ☐ Morphine **
- ☐ Norcodeine
- ☐ Norhydrocodone **
- ☐ Normorphine

☐ Opioids/Opiate Analogs
- ☐ 6-alpha-Naloxol
- ☐ 6-beta-Naltrexol
- ☐ Dextromethorphan
- ☐ Dextrorphan
- ☐ Meperidine **
- ☐ Nalbuphine
- ☐ Naloxone **
- ☐ Naltrexone **
- ☐ Normeperidine
- ☐ Pentazocine **

☐ Oxycodone
- ☐ Noroxycodone **
- ☐ Oxycodone **
- ☐ Oxymorphone **

☐ Pregabalin
- ☐ Pregabalin **

Propoxyphene
- ☐ Propoxyphene **

☐ Phencyclidine
- ☐ PCP **

☐ Sedative Hypnotics (Nonbenzodiazepines)
- ☐ Zolpidem **

☐ Skeletal Muscle Relaxants
- ☐ Carisoprodol **
- ☐ Cyclobenzaprine **
- ☐ Meprobamate **

Stereoisomer (Enantiomer)Analysis
- ☐ Methamphetamine D/L Isomer *
  *Reflex only

☐ Stimulants
- ☐ alpha-PVP **
- ☐ MDPV

☐ Tapentadol
- ☐ N-Desmethyltapentadol
- ☐ Tapentadol **

☐ Tramadol
- ☐ O-Desmethyl-cis-tramadol**
- ☐ Tramadol **

☐ Others
- ☐ 4-Hydroxy-Xylazine
- ☐ Kava Plant
- ☐ LSD
- ☐ N-Desmethyl-Loperamide
- ☐ Xylazine

PATIENT AUTHORIZATION - REQUIRED

I confirm that the sample I provided is mine and hasn't been altered. I allow VHL to share my test results with my doctors and to bill my insurance. I understand that I'm responsible for any unpaid fees.

x _____ _____
Patient Signature | Date

PROVIDER AUTHORIZATION - REQUIRED

I'm ordering VHL to test the chosen drugs, which I believe are necessary for this patient. These drugs are my choice, not VHL's. This order is specific to this patient's needs and not for everyone in my practice. I release VHL from any tests they conduct that aren't medically necessary later.

_____ _____
Authorized Provider Signature | Date

DRUGS/METABOLITES	URINE CONFIRMATION	URINE SCREEN	ORAL FLUID CONFIRMATION	ORAL FLUID SCREEN
Alcohol				
EtG/EtS	•	•		
Alkaloids, Not Otherwise Specified				
7-OH-Mitragynine	•			
Cotinine-Nicotine	•	•	•	•
Kratom-Mitragynine	•		•	
Psilicon	•			
Amphetamines				
Amphetamine	•	•	•	•
Ephedrine	•			
Methamphetamine	•	•	•	•
Phentermine	•		•	•
Analgesics, Non-Opioid				
Acetaminophen	•		•	
Antidepressants, Not Otherwise Specified				
Bupropion	•			
O-Desmethylvenlafaxine	•			
Venlafaxine	•		•	
Antidepressants, Serotonergic Class				
Citalopram	•		•	
Duloxetine	•		•	
Fluoxetine	•		•	
Norfluoxetine	•			
Paroxetine	•		•	
Sertraline	•		•	
Tianeptine	•			
Trazodone	•			
Antidepressants, Tricyclic And Other Cyclicals				
Amitriptyline	•		•	
Desipramine	•		•	
Desmethyldoxepin	•			
Doxepin	•		•	
Imipramine	•		•	
Nortriptyline	•		•	
Antipsychotics, Not Otherwise Specified				
Aripiprazole	•			
Norquetiapine	•			
Quetiapine	•		•	
Barbiturates				
Butalbital	•	•		
Phenobarbital	•	•		
Benzodiazepines				
Alpha-OH-alprazolam	•	•		
Alpha-OH-midazolam	•			
Alpha-OH-triazolam	•	•		
Alprazolam	•	•	•	•
7-aminoclonazepam	•	•	•	•
Chlordiazepoxide	•	•	•	•
Clonazepam	•	•	•	•
Diazepam	•	•	•	•
Flunitrazepam	•	•		
Flurazepam	•	•	•	•
2-Hydroxyethylflurazepam	•	•		
Lorazepam	•	•	•	•
Midazolam	•			
Nordiazepam	•	•	•	•
Oxazepam	•	•	•	•
Temazepam	•	•	•	•
Buprenorphine				
Buprenorphine	•	•	•	•
Norbuprenorphine	•	•	•	•
Cannabinoids, natural				
THC-COOH	•	•	•	•
Cannabinoids, synthetic				
JWH-250 4-Hydroxypentyl	•	•		
JWH-018 5-Pentanoic Acid	•	•		
Cocaine				
Benzoylecgonine	•	•	•	•
Cocaine			•	•
Fentanyl				
Alfentanil	•	•		
Carfentanil	•	•		
Fentanyl	•	•	•	•
Norfentanyl	•	•	•	•

DRUGS/METABOLITES	URINE CONFIRMATION	URINE SCREEN	ORAL FLUID CONFIRMATION	ORAL FLUID SCREEN
Gabapentin, non-blood				
Gabapentin	•		•	
Heroin				
6-Acetylcodeine-Heroin	•	•		
6-MAM-Heroin	•	•	•	•
Heroin			•	•
Ketamine				
Ketamine	•		•	
Norketamine	•		•	
Methadone				
EDDP	•	•	•	•
Methadone	•	•	•	•
Methylenedioxy Amphetamines				
MDMA-Ecstasy	•	•	•	•
Methylphenidate				
Methylphenidate	•		•	
Ritalinic Acid	•		•	
Opiates				
Codeine	•	•	•	•
Hydrocodone	•	•	•	•
Hydromorphone	•	•	•	•
Morphine	•	•	•	•
Norcodeine	•			
Norhydrocodone	•		•	
Normorphine	•			
Opioids/Opiate Analogs				
6-alpha-Naloxol	•			
6-beta-Naltrexol	•			
Dextromethorphan	•			
Dextrorphan	•			
Meperidine	•		•	
Nalbuphine	•			
Naloxone	•		•	
Naltrexone	•		•	
Normeperidine	•			
Pentazocine	•		•	
Oxycodone				
Noroxycodone	•	•	•	•
Oxycodone	•	•	•	•
Oxymorphone	•	•	•	•
Pregabalin				
Pregabalin	•		•	
Propoxyphene				
Propoxyphene	•		•	•
Phencyclidine				
PCP	•	•	•	•
Sedative Hypnotics(Nonbenzodiazepines)				
Zolpidem	•		•	•
Skeletal Muscle Relaxants				
Carisoprodol	•		•	
Cyclobenzaprine	•		•	
Meprobamate	•		•	
Stereoisomer (enantiomer) analysis				
Methamphetamine D/L Isomer	•			
Stimulants				
alpha-PVP	•		•	
MDPV	•			
Tapentadol				
N-Desmethyltapentadol	•			
Tapentadol	•		•	
Tramadol				
O-Desmethyl-cis-tramadol	•		•	
Tramadol	•		•	
Others				
4-Hydroxy Xylazine	•			
Kava Plant	•			
N-Desmethyl-Loperamide	•			
Xylazine	•			